

<b>CWC SCHEDULE 1 DECLARATION</b>		FACILITY NAME:	
		U.S. FACILITY OR TRADING COMPANY CODE (once assigned):	
<b>FORM 1-2B DECLARATION ON TRANSFERS OF SCHEDULE 1 CHEMICAL TO OTHER FACILITIES IN THE UNITED STATES</b>			
Submit this form for each Schedule 1 chemical that was transferred to another facility in the United States during the previous calendar year.			
CAS REGISTRY NO.:		CHEMICAL NAME:	
Check this box if you have attached a structural formula for this chemical to Form A. <input type="checkbox"/>			
<b>Provide the following information for each domestic transfer of this Schedule 1 Chemical.</b>			
<b>1-2B.1</b>	a. Name of recipient company:		
	b. Street Address:		
	City:	State:	Zip Code:
	c. Quantity:	grams	
	d. Purpose(s): <input type="checkbox"/> RESEARCH <input type="checkbox"/> PHARMACEUTICAL <input type="checkbox"/> WASTE DISPOSAL <input type="checkbox"/> MEDICAL <input type="checkbox"/> PRODUCTION OF OTHER SCHEDULE 1 CHEMICAL <input type="checkbox"/> PROTECTIVE		
<b>1-2B.2</b>	a. Name of recipient company:		
	b. Street Address:		
	City:	State:	Zip Code:
	c. Quantity:	grams	
	d. Purpose(s): <input type="checkbox"/> RESEARCH <input type="checkbox"/> PHARMACEUTICAL <input type="checkbox"/> WASTE DISPOSAL <input type="checkbox"/> MEDICAL <input type="checkbox"/> PRODUCTION OF OTHER SCHEDULE 1 CHEMICAL <input type="checkbox"/> PROTECTIVE		
<b>1-2B.3</b>	a. Name of recipient company:		
	b. Street Address:		
	City:	State:	Zip Code:
	c. Quantity:	grams	
	d. Purpose(s): <input type="checkbox"/> RESEARCH <input type="checkbox"/> PHARMACEUTICAL <input type="checkbox"/> WASTE DISPOSAL <input type="checkbox"/> MEDICAL <input type="checkbox"/> PRODUCTION OF OTHER SCHEDULE 1 CHEMICAL <input type="checkbox"/> PROTECTIVE		

If additional pages of Form 1-2B for this chemical are attached, indicate the total number of pages as follows:  
 page \_\_\_\_\_ of \_\_\_\_\_ (e.g., page x of y)

## **FORM 1-2B Declaration on Transfers of Schedule 1 Chemical to Other Facilities in the United States**

Declaration and reporting requirements are set forth in Part 712 of the CWC Regulations (15 CFR 712).

Submit Form 1-2B to declare each domestic transfer of a Schedule 1 chemical to another facility in the United States during the previous calendar year. You must separately declare each transfer of a Schedule 1 chemical to another facility during the previous year (e.g., if you made four transfers of the same Schedule 1 chemical to the same company in the previous year, you must separately declare each of those four transfers).

Do not submit this form unless you answered "yes" to question 1-2.5 on Form 1-2 for this Schedule 1 chemical. Form 1-2B, if applicable, is part of your ANNUAL DECLARATION ON PAST ACTIVITIES.

Submit Form A to identify any additional information (e.g., site diagrams, maps, drawings, chemical structural formulas) you submit with your completed forms package.

In the upper right-hand corner of this form, enter the facility name or U.S. facility code (once assigned) that you entered on Form 1-1 (Schedule 1 Facility or Trading Company Identification).

For each Schedule 1 chemical being declared, provide the CAS Registry Number, if assigned, and the Chemical Name. If the chemical is not specifically listed by Chemical Name and CAS

Registry Number in Supplement No. 1 to Part 712 of the CWC Regulations (15 CFR 712), you must attach the structural formula of the chemical to Form A. Check the box to indicate that you have attached the structural formula.

Question 1-2B: Provide the information in Question 1-2B.x.a through 1-2B.x.d for each domestic transfer of this Schedule 1 chemical.

Question 1-2B.x.a: Enter the name of the company that received the Schedule 1 chemical.

Question 1-2B.x.b: Enter the address of the recipient company listed in Question 1-2B.X.a. DO NOT PROVIDE A POST OFFICE BOX.

Question 1-2B.x.c: Enter the quantity of the transaction in grams.

Question 1-2B.x.d: Check the purpose intended for the transferred Schedule 1 chemical.

If there is insufficient space to record all of your domestic transfers, use additional copies of Form 1-2B. Indicate the page number of each additional page and total the number of pages of Form 1-2B for this chemical using the format "page x of y" (as described at the bottom of this form).